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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) Initial Appointment Amended Statement

Candidate Candidate Name: **Stephanie S Clayton**
Address: **9825 Woodson Dr.**
Address2:
City: **Overland Park** Zip: **66207**
Home Phone: **(913) 205-4970** Business Phone: **(913) 205-4970** Cell Phone: **(913) 205-4970**
County: **Johnson** Email Address: **stephaniesawyerclayton@gmail.com**
Office Sought: **State Representative** District No.: **19**

Treasurer Date Appointed: **12/14/2015**
Treasurer Name: **Jon Corbin**
Address: **9328 Somerset Dr.**
Address2:
City: **Overland Park** State: **KS** Zip: **66207-2012**
Home Telephone: Business Phone: Cell Phone: **(913) 961-7063**
Email Address: **jrcorbin@gmail.com**

Candidate Date Appointed:
Committee Chairperson's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:
Date: **8/15/2016 1:02:57 PM** Signature of Candidate: **Stephanie S. Clayton**

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